

Clark County Coroner
1704 Pinto Lane
Las Vegas, NV 89106
(702) 455-3210



AUTOPSY REPORT

Case Number: [REDACTED]

October 3, 2017

AUTOPSY REPORT

PATHOLOGIC EXAMINATION ON THE BODY OF

[REDACTED]

DIAGNOSES

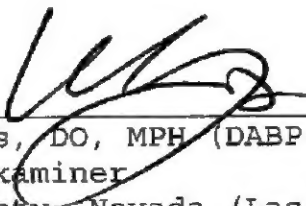
1. Gunshot Wound of the Right Upper Chest, Penetrating (see injury description).
2. Gunshot Wound of the Right Lower Arm, Perforating (see injury description).
3. Hemothorax, Right, Chest.
4. Pale Internal Organs consistent with Acute Blood Loss.
5. Hydronephrosis, Left, Kidney.

COMMENT: Based on the geometric alignment of wounds in the right arm and chest, the bullet most likely entered and exited from the right lower arm that was extended and flexed over the front of the chest then grazed the medial aspect of the right upper arm and then entered the right upper chest.

OPINION

CAUSE OF DEATH: The cause of death of this [REDACTED]-year-old female, [REDACTED], is GUNSHOT WOUND OF THE RIGHT UPPER CHEST.

MANNER OF DEATH: HOMICIDE.


Lary Simms, DO, MPH (DABP-AP, CP, FP)
Medical Examiner
Clark County, Nevada (Las Vegas)
LS/kra/amu

DATE: Dec 20 2017

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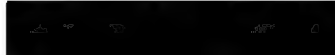


AUTOPSY REPORT

Case Number: [REDACTED]

October 3, 2017

POSTMORTEM EXAMINATION ON THE BODY OF



NOTICE: Forensic, medical and scientific evidence as proof of a fact can establish that fact to an extent varying between slight possibility to certainty. The minimal standard of proof for all conclusions in this report is to a reasonable degree of scientific, medical and forensic certainty; the degree of certainty for any given conclusion in this report can range from this lowest standard of certainty up to beyond a reasonable doubt.

The manner of death is based on the information available at the time of signature.

AUTOPSY: Date of pronounced death is October 1, 2017. The autopsy is performed by Lary Simms, DO, MPH, Medical Examiner, at 1450 hours, October 3, 2017.

CLOTHING: The body is received unclothed. Accompanying the body are black shoes, black top, blue shorts, red bandana, blue top, gray sweater, and multicolored underwear.

EXTERNAL EXAMINATION: The body is that of a normally developed adult. Rigor mortis is absent. Lividity is present posteriorly and in a patchy distribution anteriorly. The head hair is dark and long. The scalp is unremarkable. The eyes are closed. The corneas are cloudy. The irides are dark. The nose, lips and mouth are unremarkable. The teeth are natural and in fair repair. No injuries are identified to the external neck. The chest and abdomen show no evidence of natural disease. The extremities are equally and symmetrically developed. Fingerprint ink is present on the hands bilaterally. The fingernails and toenails are medium in length and the toenails demonstrate remnants of decoration. The external genitalia are female. The back and buttocks show no evidence of natural disease.

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INVENTORY OF TATTOOS:

1. Writing located in the right lateral chest.
2. Collinear dots located on the left lower arm.

INVENTORY OF MEDICAL TREATMENT:

1. An intravenous catheter is present in the right arm associated with several needle punctures.

INVENTORY OF RADIOGRAPHIC FINDINGS:

COMMENT: Digital radiographs are interpreted on an ENTUITIVE monitor; extracorporeal objects are present; degenerative skeletal change is present; acute medical intervention is present.

1. Postmortem regional radiographs of the head and neck are unremarkable.
2. Postmortem regional radiograph of the chest demonstrates ballistically insignificant and significant bullet fragments scattered over the right chest and midline; the soft tissues demonstrate broad areas of air; the right lung field is hazy.
3. Postmortem regional radiographs of the abdomen and pelvis are unremarkable.
4. Postmortem regional radiographs of the extremities demonstrates a soft tissue defect in the right upper arm associated with ballistically insignificant bullet fragments and a soft tissue defect in the right lower arm associated with a ballistically insignificant bullet fragments.

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INVENTORY OF GUNSHOT INJURY:

1. Located on the back of the right arm is a gunshot wound of entrance measuring 0.22 inch in dimension; the wound is composed of a central hole measuring 0.12 inch in dimension associated with a circumferential abrasion collar measuring up to 0.05 inch in dimension.

The bullet courses through the skin and subcutaneous tissues of the right lower arm, coursing through the volar compartment without causing bony injury, and exits on the volar right lower arm; the exit wound is irregular in shape measuring 1.5 x 1.0 inch in dimension.

2. Located in the medial aspect of the right upper arm is an irregular superficial atypical graze wound measuring 1.5 inch in dimension associated with satellite ecchymoses and satellite curvilinear abrasion (see photographs).
3. Located in the right upper chest 13.2 inches from the top of the head and 5.5 inches to the right of the midline is an irregular atypical gunshot wound of entrance measuring 0.8 x 0.6 inch in dimension associated with satellite irregular and curvilinear abrasions and perforating punctate injury.

The bullet courses through the skin and subcutaneous tissues of the right upper chest and enters the right pleural cavity through the 2nd intercostal space; the bullet induces multiple lacerations to the upper portion of the right lower lung and the right upper lung and courses into the lateral aspect of the central thoracic vertebral column.

Multiple lead and jacket fragments are recovered from the right lung and the right lateral portion of the thoracic vertebral column.

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The right pleural cavity contains 400 mL of liquid blood and 10 grams of clot.

The thoracic spinal canal is exposed via an anterior approach; the membranous compartments show focal epidural and subdural hemorrhages; the surfaces of the exposed thoracic spinal cord are unremarkable.

The laryngotracheobronchial tree and lungs bilaterally demonstrate broad areas of aspirated blood.

The bullet courses from front-to-back and right-to-left directly. Examination of wound of entrance shows no evidence of close-range firing.

INVENTORY OF EXTERNAL FINDINGS:

1. The central chest demonstrates an irregular abrasion suggestive of resuscitation injury.
2. The right lateral neck demonstrates a curvilinear punctate abrasion.
3. Epistaxis is present.

INTERNAL EXAMINATION:

MEASUREMENTS AND WEIGHTS (approximate/estimate only):

Height:	64 inches
Weight:	150 pounds
Heart:	275 grams
Lungs:	800 grams
Liver:	1600 grams
Spleen:	100 grams
Left kidney:	60 grams
Right kidney:	140 grams
Brain:	1320 grams

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BODY CAVITIES: The body is entered by a Y-shaped incision. The right pleural cavity contains 100 ml of liquid blood associated with multiple adhesions, often dense; the rest of the body cavities and peritoneal surfaces are unremarkable. The internal organs that are present retain their normal anatomic position and relationships.

NECK ORGANS: The tongue shows no external injury and on serial sectioning is unremarkable. The surfaces of the epiglottis show no abnormalities.

The suprahyoid and infrahyoid (strap) muscles of the neck are dissected in layers and show no evidence of antemortem hemorrhage.

The hyoid bone is dissected. The synchondroses of the hyoid bone are non-fused and intact. The greater horns of the hyoid bone show no evidence of fracture or periosteal hemorrhage.

The thyroid cartilage is dissected. The superior horns and laminae show no evidence of fracture or perichondral hemorrhage.

The cricoid cartilage ring is dissected. The cricothyroid membrane shows no evidence of hemorrhage. The cricoid cartilage shows no evidence of fracture or perichondral hemorrhage.

The prevertebral soft tissue and muscles of the cervical vertebral column show no evidence of antemortem hemorrhage. The anterior cervical vertebral column shows no evidence of hemorrhage, fracture or dislocation.

CARDIOVASCULAR SYSTEM: The aorta and great vessels demonstrate yellow streaking. The coronary arteries have a normal surface course and configuration; the coronary circulation is right dominant. On serial sectioning the left coronary artery system and the right coronary artery system exhibit no significant pathologic changes.

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The valves of the heart are unremarkable. The ventricular chambers are unremarkable. On serial sectioning the myocardium displays no focal pathologic changes.

RESPIRATORY SYSTEM: Except for the findings previously described, the trachea and major bronchi are unremarkable. The pulmonary vessels are unobstructed. On serial sectioning, in addition to the findings previously described, the pulmonary parenchyma demonstrates edema.

HEPATOBIILIARY SYSTEM: The capsular surface of the liver is smooth and without adhesions. On serial sectioning the hepatic parenchyma has a pale tan-yellow color and a firm consistency. The gallbladder and biliary tract are unremarkable.

HEMOLYMPHATIC SYSTEM: The capsular surface of the spleen is smooth and without adhesions. On serial sectioning the splenic parenchyma is pale and otherwise unremarkable. The internal lymph nodes identified are unremarkable.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. Stomach content is 100 milliliters of red fluid. The stomach, small bowel and colon are unremarkable. The pancreas has a normal size and on serial sectioning is pale.

GENITOURINARY SYSTEM: The renal surfaces are granular. The left kidney is reduced in size.

Serial sectioning of the right kidney demonstrates a normal cortex, calices, pelvis and ureter.

Serial sectioning of the left kidney demonstrates cortical and medullary atrophy associated with hydronephrosis; the left ureter is mildly dilated.

The uterus, fallopian tubes and ovaries are present and unremarkable. The endometrium is thick.

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ENDOCRINE SYSTEM: The thyroid gland has a normal size and on serial sectioning is pale. The adrenal glands have a normal size and on serial sectioning are pale. The rest of the endocrine system shows no identifiable abnormalities.

CENTRAL NERVOUS SYSTEM: The scalp, subscalp soft tissue and calvaria show no evidence of injury. On entering the cranial cavity the membranous compartments are free of hemorrhage. The leptomeninges and the surfaces of the cerebral hemispheres are unremarkable. The vessels at the base of the brain have a normal configuration. The base of the skull shows no evidence of injury. On serial sectioning the brain is pale and reveals no grossly visible changes of natural disease.

PHYSICAL EVIDENCE RECOVERY AND DISPOSITION:

1. Small caliber lead and jacket fragments recovered from the right lung and thoracic vertebral column to custody of Las Vegas Metropolitan Police Department.

FLUIDS AND TISSUES SUBMITTED:

1. Postmortem heart blood.
2. Liver tissue.
3. Bile.
4. Brain tissue.
5. Urine.
6. Vitreous humor.
7. Autopsy tissue to stock.

TESTING ORDERED:

1. Toxicologic analysis [NMS: Basic] on autopsy blood.